

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (include Reference to PCT Internat. Appl.) PCT/FR2004/003262ATTORNEY'S DOCKET NO
RN03177

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYNTHESIS OF ACYLUREAS AND COMPOSITION COMPRISING ACYLUREAS

the specification of which (check only one item below):

☐ is attached hereto.☐ was filed as United States application

Serial No. _____

on _____

and was amended

on _____ (if applicable)

☒ was filed as PCT international applicationNumber **PCT/FR2004/003262** _____on **December 16, 2004** _____

and amended under PCT ARTICLE 19

on _____ (if applicable).

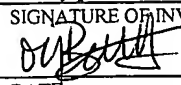
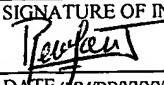
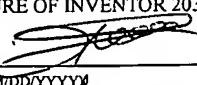
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations. §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY PCT indicate PCT	APPLICATION NUMBER	DATE OF FILING (day month year)	PRIORITY CLAIMED UNDER 35 USC 119	
FRANCE	0315409	24/12/2003	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO
			<input type="checkbox"/> YES	<input type="checkbox"/> NO

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<p>I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:</p>																									
<p>PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th colspan="2" style="text-align: center;">U.S. APPLICATION</th> <th colspan="3" style="text-align: center;">STATUS (CHECK ONE)</th> </tr> <tr> <th style="text-align: center;">U.S. APPLICATION NUMBER</th> <th style="text-align: center;">U.S. FILING DATE</th> <th style="text-align: center;">PATENTED</th> <th style="text-align: center;">PENDING</th> <th style="text-align: center;">ABANDONED</th> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>						U.S. APPLICATION		STATUS (CHECK ONE)			U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED										
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<p>POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney's and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith (List name and registration number)</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Kevin McVEIGH</td> <td style="width: 25%;">Reg. No. 33,017</td> <td style="width: 25%;">Mialeeka WILLIAMS-BIBBS</td> <td style="width: 25%;">Reg. No. 48,037</td> </tr> <tr> <td> </td> <td> </td> <td>Jean-Louis SEUGNET</td> <td>L0088</td> </tr> </table>						Kevin McVEIGH	Reg. No. 33,017	Mialeeka WILLIAMS-BIBBS	Reg. No. 48,037			Jean-Louis SEUGNET	L0088												
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<p>Send Correspondence to: Jean-Louis Seugnet Rhodia Inc.-Legal Department 8 CEDAR BROOK DRIVE CN 7500, CRANBURY, NJ 08512-7500</p>				<p>Direct Telephone Calls to: <small>(name and telephone number)</small> Jean-Louis SEUGNET (609) 860-4180</p>																					
201	FULL NAME OF INVENTOR BERNARD	FAMILY NAME BERNARD	FIRST GIVEN Jean-Marie	SECOND GIVEN NAME																					
	RESIDENCE & CITIZENSHIP SAINT-LAURENTD'AGNY	CITY SAINT-LAURENTD'AGNY	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP FRANCE																					
	POST OFFICE ADDRESS 320 route du Large	POST OFFICE ADDRESS 320 route du Large	CITY SAINT-LAURENTD'AGNY	STATE & ZIP CODE/COUNTRY F-69440 FRANCE																					
202	FULL NAME OF INVENTOR REVELANT	FAMILY NAME REVELANT	FIRST GIVEN Denis	SECOND GIVEN NAME																					
	RESIDENCE & CITIZENSHIP GENAS	CITY GENAS	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP FRANCE																					
	POST OFFICE ADDRESS 4 rue Bossuet	POST OFFICE ADDRESS 4 rue Bossuet	CITY GENAS	STATE & ZIP CODE/COUNTRY F-69740 FRANCE																					
203	FULL NAME OF INVENTOR AMOUYAL	FAMILY NAME AMOUYAL	FIRST GIVEN Cédric	SECOND GIVEN NAME																					
	RESIDENCE & CITIZENSHIP GRIGNY	CITY GRIGNY	STATE OR FOREIGN COUNTRY FRANCE	COUNTRY OF CITIZENSHIP FRANCE																					
	POST OFFICE ADDRESS 2 rue Emile Combes	POST OFFICE ADDRESS 2 rue Emile Combes	CITY GRIGNY	STATE & ZIP CODE/COUNTRY F-69520 FRANCE																					
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>																									
SIGNATURE OF INVENTOR 201 		SIGNATURE OF INVENTOR 202 		SIGNATURE OF INVENTOR 203 																					
DATE (MM/DD/YYYY) May 09 th 2006		DATE (MM/DD/YYYY) May 10 th 2006		DATE (MM/DD/YYYY) May 10 th 2006																					